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PTO/SB/05 (2/88)  
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<b>UTILITY PATENT APPLICATION TRANSMITTAL</b> (Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))	<b>Attorney Docket No.</b>	<b>NOR-9</b>
	<b>First Inventor or Application Identifier</b>	<b>Yu-Hwa Lo</b>
	<b>Title</b>	<b>Method for Design of Epitaxial Layer and Substrate structures for high-quality</b>
	<b>Express Mail Label No.</b>	<b>EL150617561</b>

<b>APPLICATION ELEMENTS</b> See MPEP chapter 600 concerning utility patent application contents.	<b>ADDRESS TO:</b> Assistant Commissioner for Patents Box Patent Application Washington, DC 20231
1. <input checked="" type="checkbox"/> * Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing)	6. <input type="checkbox"/> Microfiche Computer Program (Appendix)
2. <input checked="" type="checkbox"/> Specification [Total Pages <b>17</b> ] (preferred arrangement set forth below) <ul style="list-style-type: none"><li>- Descriptive title of the invention</li><li>- Cross References to Related Applications</li><li>- Statement Regarding Fed sponsored R &amp; D</li><li>- Reference to Microfiche Appendix</li><li>- Background of the invention</li><li>- Brief Summary of the invention</li><li>- Brief Description of the Drawings (if filed)</li><li>- Detailed Description</li><li>- Claim(s)</li><li>- Abstract of the Disclosure</li></ul>	7. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) <ul style="list-style-type: none"><li>a. <input type="checkbox"/> Computer Readable Copy</li><li>b. <input type="checkbox"/> Paper Copy (identical to computer copy)</li><li>c. <input type="checkbox"/> Statement verifying identity of above copies</li></ul>
3. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets <b>3</b> ]	<b>ACCOMPANYING APPLICATION PARTS</b> <ul style="list-style-type: none"><li>8. <input type="checkbox"/> Assignment Papers (cover sheet &amp; document(s))</li><li>9. <input type="checkbox"/> 37 C.F.R. § 3.73(b) Statement (when there is an assignee) <input type="checkbox"/> Power of Attorney</li><li>10. <input type="checkbox"/> English Translation Document (if applicable)</li><li>11. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations</li><li>12. <input type="checkbox"/> Preliminary Amendment</li><li>13. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)</li><li>14. <input checked="" type="checkbox"/> * Small Entity Statement(s) <input type="checkbox"/> Statement filed in prior application, Status still proper and desired (PTO/SB/09-12)</li><li>15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)</li><li>16. <input type="checkbox"/> Other: .....</li></ul>
4. Oath or Declaration [Total Pages <input ]<ul="" type="checkbox"/> <li>a. <input type="checkbox"/> Newly executed (original or copy)</li> <li>b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. § 1.63(d)) (for continuation/divisional with Box 17 completed) [Note Box 5 below]<ul style="list-style-type: none"><li>i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b> Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b).</li></ul></li>	
5. <input type="checkbox"/> Incorporation By Reference (useable if Box 4b is checked) The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered to be part of the disclosure of the accompanying application and is hereby incorporated by reference therein.	
17. If a <b>CONTINUING APPLICATION</b> , check appropriate box, and supply the requisite information below and in a preliminary amendment: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No: _____ Prior application Information: Examiner _____ Group / Art Unit: _____	

<b>18. CORRESPONDENCE ADDRESS</b>			
<input checked="" type="checkbox"/> Customer Number or Bar Code Label <b>020808</b> (Insert Customer No. or Attach bar code label here)		or <input type="checkbox"/> Correspondence address below	
Name _____			
Address _____			
City	State	Zip Code	
Country	Telephone	Fax	

Name (Print/Type)	<b>Christopher R. Pastel</b>	Registration No. (Attorney/Agent)	<b>37,694</b>
Signature	<i>Christopher R. Pastel</i>	Date	<b>2/10/99</b>

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

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**FEE TRANSMITTAL**

Patent fees are subject to annual revision on October 1.

These are the fees effective October 1, 1997.

Small Entity payments must be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB/09-12. See 37 C.F.R. §§ 1.27 and 1.28.**TOTAL AMOUNT OF PAYMENT (\$)** 380.00**Complete if Known**

Application Number	
Filing Date	02/10/99
First Named Inventor	Yu-Hwa Lo
Examiner Name	
Group / Art Unit	
Attorney Docket No.	NOR-9

**METHOD OF PAYMENT (check one)**

- 1.
- ☒
- The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit Account Number  
Deposit Account Name

02-0910

Brown, Pinnisi &amp; Michaels PC

☒ Charge Any Additional Fee Required Under 37 C.F.R. §§ 1.16 and 1.17☐ Charge the Issue Fee Set in 37 C.F.R. § 1.18 at the Mailing of the Notice of Allowance

- 2.
- ☒
- Payment Enclosed:

☒ Check ☐ Money Order ☐ Other**FEE CALCULATION (continued)****3. ADDITIONAL FEES**

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
105	130	205	65	Surcharge - late filing fee or oath	
127	50	227	25	Surcharge - late provisional filing fee or cover sheet.	
139	130	139	130	Non-English specification	
147	2,520	147	2,520	For filing a request for reexamination	
112	920*	112	920*	Requesting publication of SIR prior to Examiner action	
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	
115	110	215	55	Extension for reply within first month	
116	400	216	200	Extension for reply within second month	
117	950	217	475	Extension for reply within third month	
118	1,510	218	755	Extension for reply within fourth month	
128	2,060	228	1,030	Extension for reply within fifth month	
119	310	219	155	Notice of Appeal	
120	310	220	155	Filing a brief in support of an appeal	
121	270	221	135	Request for oral hearing	
138	1,510	138	1,510	Petition to institute a public use proceeding	
140	110	240	55	Petition to revive - unavoidable	
141	1,320	241	660	Petition to revive - unintentional	
142	1,320	242	660	Utility issue fee (or reissue)	
143	450	243	225	Design issue fee	
144	670	244	335	Plant issue fee	
122	130	122	130	Petitions to the Commissioner	
123	50	123	50	Petitions related to provisional applications	
126	240	126	240	Submission of Information Disclosure Stmt	
581	40	581	40	Recording each patent assignment per property (times number of properties)	
146	790	246	395	Filing a submission after final rejection (37 CFR 1.129(a))	
149	790	249	395	For each additional invention to be examined (37 CFR 1.129(b))	
Other fee (specify) _____					
Other fee (specify) _____					
* Reduced by Basic Filing Fee Paid					

Fee Description

Fee Paid

**FEE CALCULATION****1. BASIC FILING FEE**

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
101	790	201	395	Utility filing fee	380
106	330	206	165	Design filing fee	
107-540	207	270		Plant filing fee	
108	790	208	395	Reissue filing fee	
114	150	214	75	Provisional filing fee	

**SUBTOTAL (1) (\$)** 390**2. EXTRA CLAIM FEES**

Total Claims	Extra Claims	Fee from below	Fee Paid
17	-20**		
2	-3**		
Multiple Dependent			

\*\*or number previously paid, if greater; For Reissues, see below

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description
103	22	203	11	Claims in excess of 20
102	82	202	41	Independent claims in excess of 3
104	270	204	135	Multiple dependent claim, if not paid
109	82	209	41	** Reissue independent claims over original patent
110	22	210	11	** Reissue claims in excess of 20 and over original patent

**SUBTOTAL (2) (\$)** 380**SUBTOTAL (3) (\$)** 380**SUBMITTED BY**

Typed or Printed Name

Christopher R. Pastel

Signature

C. Pastel

Date

2/10/99

**Complete (if applicable)**

Reg. Number

37,694

Deposit Account User ID

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